v. Awareness and knowledge of people on factors affecting oral health; and

vi. Treatment-seeking behaviour of people for their oral health problems.

(c) and (d)At present, the dentists population ratio in India is 1:22,500 against the WHO recommendation of 1:75,000.

**Health hazards due to cell phones**

†946. SHRI P.K. MAHESHWARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether towers of cell phones have become health-hazards to the people in the vicinity of these towers;

(b) if so, what kind of risk are posed by it to the human health;

(c) whether a research have been conducted by the Ministry of Health in this regard; and

(d) if not, whether Government propose to conduct such research?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) According to ICMR, currently no conclusive data exist to give a reason for concern about the health effects based on studies carried out in this regard. Further, according to Department of Telecommunications, there is no substantial evidence of any health hazards to people due to the expansion of wireless and other networks.

**Mismanagement at the Maternity Hospital, R.K. Puram and Safdarjung Hospital**

947. SHRIMATI KAMLA MANHAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether doctors are generally not available at the maternity hosptial, R.K. Puram;

(b) whether due to this, all the operational cases are transferred to Safdarjung Hospital;

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†Original notice of the question was received in Hindi.

(c) whether there is shortage of beds in maternity ward of Safdarjung al Hospit and sometimes two patients occupy same bed;

(d) if so, what action is being taken or proposed to be taken by Government;

(e) whether Government are aware that there are vacancy in Safdarjung Hospital particular for those who distribute food to patients;

(f) whether this short-coming is met by deputing Safaikarmacharis; and

(g) action taken by Government to fill the vacancies in the hosptial?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Arrangements are in place to ensure the availability of Doctors round the clock in the CGHS Maternity and Gynae hospital, R.K. Puram. The emergency cases after 4.00 p.m. are managed by an emergency duty doctor and a Consultant on call duty.

(b) Routine operation cases are generally not referred to the Safdarjung Hospital by the CGHS Maternity and Gynae hospital, R.K. Puram.

The CGHS Maternity and Gynae hospital, R.K. Puram is only a secondary level hospital which-does not have intensive care unit ward, special care nursery, specialist in anesthesia, etc. Therefore, the maternity cases which are beyond the scope of this hospital are referred by the doctors for further management to the Safdarjung Hospital or to any of CGHS recognised private hospitals having proper facilities.

(c) and (d) Since no patient is refused admission in Safdarjung Hospital, hence occasionally such a possibility may not be ruled out.

(e) and (f) Out of the 107 posts sanctioned for the Kitchen of Safdarjung Hospital, 85 posts are filled up and the remaining 22 posts are vacant. Accordingly, the kitchen services are managed with the 85 Tilled up posts.

(g) The vacancies in the hospital can be filled up subject to fulfillment completion of the necessary administrative formalities.